Hutchison (J. C.)

The Brooklyn City Hospital.

Lith. of Geo. Hayward,

171 Pearl St. New York.

VIEW OF THE CITY HOSPITAL, BROOKLYN, L.I.

THE

Brooklyn City Hospital,

IN 1858,

AND THE ADDRESS

BY

J. C. HUTCHISON, M. D.,

ONE OF THE ATTENDING SURGEONS,

Delivered at the Inauguration of the Pathological Hall,

ON THE 25TH OF NOVEMBER, 1858.

"For want of timely care,
Millions have died of medicable wounds."

BROOKLYN:
I. VAN ANDEN'S STEAM PRESSES, 30 AND 32 FULTON STREET.

1859.

TRUSTEES AND OFFICERS

OF THE

BROOKLYN CITY HOSPITAL,

FOR 1859.

TRUSTEES,

THE MAYOR, Ex-Officio.

Arthur W. Benson,	John Halsey,
Charles E. Bill,	George Hall,
Hamlin Blake,	Joshua L. Pope,
Conklin Brush,	Thomas Messenger,
Horace B. Claflin,	Henry P. Morgan,
George Coggeshall,	Abiel Abbot Low,
Peter C. Cornell,	Henry E. Pierrepont,
Isaac H. Frothingham,	William M. Richards,
Richard Field,	Cyrus P. Smith,
John Greenwood,	Robert Sherwell.

JOHN HASLETT, President.
ROBERT NICHOLS, Vice-President.
JOHN BLUNT, Treasurer.
HENRY P. MORGAN, Secretary.

OFFICERS APPOINTED BY THE TRUSTEES,

PHYSICIANS,	SURGEONS,
James Crane,	James M. Minor,
D. S. Landon,	De Witt C. Enos,
H. S. Smith,	Daniel E. Kissam,
A. Nelson Bell,	J. C. Hutchison,
George Cochran,	C. E. Isaacs.

RESIDENT PHYSICIANS,

JAMES J. ALLINGHAM, P. ROBINSON MOORE.

RESIDENT SURGEONS,

ALEXANDER TINSLEY, WILLIAM GREEN, GEO. K. SMITH.

SUPERINTENDENT,

JOHN T. E. NICHOLS.

THOMAS DEAN, Apothecary.

PREFATORY REMARKS.

The prominent feature in the affairs of this Institution for 1858, being the erection of a building for Pathological uses, and its consequent dedication to Professional and Scientific purposes, under the distinctive appellation of "Pathological Hall." The Trustees have thought proper to note the important event, by requesting the appropriate address of Dr. Hutchison, the orator of the occasion, for publication, with the statistical Reports. The Dr. having kindly consented, the address, with the preliminary proceedings is herewith presented.

THE BUILDING

Is 50 by 45 feet; the basement, or ground floor is appropriated more especially to Pathological examinations, with separate rooms for the different stages of such examinations, and a room for Coroners' inquests and funerals.

On the second floor is a large Lecture Room, in the shape of an amphitheatre, which will accommodate an audience of about 350 persons. The funnel shape of this amphitheatre, the base of which is on this floor, allows room on the same for one large room of 48 by 20, which may at any time be occupied as a ward, and a smaller one with washing apparatus, commodious closets, &c., as a preparatory for the Lecture Room.

The third floor forms a gallery to the Lecture Room, which is intended for a Museum and Library. The whole well lighted through a dome and by windows at the sides, and at night by judiciously arranged gas fixtures. The whole forming the most complete building of the kind to be found attached to any Hospital in the United States, as we were assured by our Professional visitors from our sister city, on the inaugural occasion; and it has been exceedingly gratifying to the Trustees, that it has upon a recent occasion been happily made practically useful to the City in the conveniencies it afforded for satisfactory examination of an exhumed subject, where poisoning had been suspected, and which, under the accurate investigation of the Resident Physician, was proved groundless.

The completion of the building brought forth the following note:

To the Trustees of the Brooklyn City Hospital:—

Gentlemen: The Physicians and Surgeons of the Brooklyn City Hospital, wishing to call the attention of the Medical Profession to the new building for Pathological purposes, which your liberality has erected, respectfully request:

That the Medical Profession of Brooklyn and Williamsburgh be invited to join with us in some appropriate inaugural ceremonies;

That the respective staffs of the Flatbush, the Long Island College and the New York Hospitals, be especially invited to be present;

That an address be given by one of our staff.

Knowing the vital importance of centering the interest of our professional brethren in our Institution; we are of the opinion that the new building should be offered to the Medical Profession of our city, free of cost, for their Society meetings.

JAMES CRANE, M. D.,
DANIEL E. KISSAM, M. D.,
D. S. LANDON, M. D.,
H. S. SMITH, M. D.,
J. C. HUTCHISON, M. D.,
A. N. BELL, M. D.,
C. E. ISAACS, M. D.,
GEORGE COCHRAN, M. D.

Brooklyn, October 7th, 1858.

To which the Trustees responded by authorizing their President to make such arrangements as would lead to the most satisfactory accomplishment of the wishes therein expressed, which was consummated on the night of the 25th November, 1858; and in the presence of the Trustees and a most respectable and learned audience of professional and other gentlemen, the use of the building was formally proffered, and the Dedicatory Address delivered, which is hereafter appended.

With regard to the general affairs of the Hospital, they are in a flatteringly flourishing condition, and we have every indication that it is increasing in utility and consequent importance. The following extract from the Report of 1855, it has been thought advisable to reprint, as it is suggestive of a way and means of doing much good, and thus extending the utility of the Institution.

"We would suggest a plan by which the benevolent might do much good either by living or "post-mortem" beneficence, viz: The endowment of beds, from one to any number. The plan of free beds, from the liberality of individuals, has, we believe, been for years in successful operation in the Massachusetts General Hospital. The plan of the system we have in view, in reference to ourselves, and its operation may be explained as follows: By a donation or legacy of $2,000 as a fund, the annual interest at 7 per cent. would be sufficient to compound for the support of one bed for a year. Allowing the average period of about four weeks for each ordinary case of sickness, that bed, technically so called) would afford the comforts of the Hospital to nearly 13 persons in the course of one year and so on year after year; And for, an amount of four, six, or eight thousand dollars, in proportion. It must of course be understood that in stating the time and number to each bed, cases of fracture and many tedious surgical cases and curable chronic diseases, are not considered; however the greater time, though it lessens the number, by no means detracts from

the usefulness of the bed. The name of the donor might be always attached, and the privileges of admission specifically transmitted by will, or formally vested in the Board of Trustees as "free beds;" thus transmitting to posterity a memento as enduring and more speakingly useful than all the crumbling devices for adorning cemeteries, and one which does not necessarily supersede the tablet, but might rather verify its eulogium. Such an additional trust, the Board would gladly accept and see faithfully executed, and for the operation of something of the kind, our new wing gives ample scope."

REPORT

OF THE

Superintendent of the Brooklyn City Hospital,

For the Year ending December 31, 1858.

Eight hundred and eighty-seven persons have received the benefits of this Institution during the year.

Of whom have been cured	523
" Relieved	70
" Discharged by request	66
" Eloped or disorderly	67
" Died	57
Remaining 31st December, 1858	104

The number remaining from 1857	116
The nett admissions of 1858	771

The whole number treated during the year, including those from 1857, may be classified as follows:

Seamen	580
Who paid in whole or part	112
Charity patients	195

Of those who paid for themselves, 24 became charity patients, and remained such, on an average of sixty-two days each patient.

Seamen	13	
Pay charity	26	
Coroner's Inquest	18	
		57

Of the above 57 deaths, 18 were Coroner's cases.

Deducting Coroner's cases, leaves the actual number from Disease, &c.	39

The whole number of daily rations issued to patients amounted to	39,344	
The whole number issued to those employed in the House	9,125	
		48,469

SEX:

Males	789
Females	89

AGE:

The number under 15	26
" from 15 to 21	135
" " 21 " 50	684
" over 50	42

NATIVITY.		OCCUPATIONS.	
United States	309	Seamen	610
Ireland	313	Laborers	150
England & Scotland	120	Domestics	60
Germany	58	Clerks	11
France and Spain	25	Carpenters	11
Denmark and Portugal	25	Merchants	7
Sweden	23	Blacksmiths	2
Prussia	4	Masons	6
East and West Indies	9	Grocers	6
At Sea	1	Painters	9
		Hatters	3
		Butchers	2
		Coachmen	3
		Tailors	2
		Unknown	5
	887		887

The inmates of the Hospital other than patients, including Superintendent and Family, House Surgeons, Physician, Apothecary, Housekeeper, Nurses, Firemen and Messenger, have throughout the year numbered about twenty-five.

All which is respectfully submitted,

By your most obedient Servant,

JOHN T. E. NICHOLS.

TO THE BOARD OF TRUSTEES OF
THE BROOKLYN CITY HOSPITAL.

GENERAL HOUSE EXPENSES,

For the Year 1858.

19,611 lbs. Beef.....	$1,801	13	
17,816 " Mutton...	1,465	87	
408 " Pork.....	50	55	
258 " Veal.....	31	18	
15,751 l'ves Bread....	1,811	34	
15,161 qts. Milk	764	47	
2,469 lbs. Rice.....	88	04	
1,069 " Coffee...	119	27	
5,637 " Sugar....	437	09	
1,234 " H'rd Soap & Starch	86	86	
1,632 " Butter...	407	53	
Gas.....	419	54	
Tea.....	221	80	
Molasses.....	27	44	
Vinegar.....	10	00	
Board of Seamen....	84	32	
Furniture.....	164	39	
Brandy.....	126	75	
Wine	409	88	
Porter	140	73	
Hard and Tin Ware..	75	42	
Fruit	29	40	
Eggs.....	87	00	
Pine Wood...	38	25	
Poultry	124	71	
Wages.....	2,976	47	
Burial of Seamen...	56	00	
Lard.....	27	53	
Meal and Flour.....	32	70	
Potatoes.....	311	25	
Soft Soap.....	150	40	
	$12,577	51	

Am't bro't forward..	$12,577	50
Wooden Ware	45	25
Fish.....	72	16
Coal..... ..	802	12
Newspapers.....	8	27
Repairs	212	78
Salt.....	7	25
Instruments, &c.....	87	26
Medicine.....	969	14
Cartage.....	22	03
Straw.....	30	86
Stationery & Print'g.	58	50
Tickets for Seamen..	6	30
Earthen Ware.....	61	05
Printing.....	9	48
Sheeting and Bandages.....	161	35
Vegetables.....	67	74
Medical Works.....	21	00
Ice.....	193	50
Trees, Labor & Manure.....	20	56
Candles and Matches.	15	64
Sending Notices....	9	56
Sundries	24	48
	$15,483	79

NOTE.—The General Expenses of the Corporation, which also include the above, are kept by the Treasurer, and include insurance, repairs, painting, grading, and expenses appertaining to grounds.

ABSTRACT

OF THE CASES TREATED IN THE

SURGICAL DEPARTMENT

OF THE

BROOKLYN CITY HOSPITAL,

FROM JANUARY 1ST, TO DECEMBER 31ST, 1858.

DISEASE OR INJURY.	Cured.	Relieved.	Removed by Request.	Eloped or Disch'd Disorderly.	Died.	Remain.	Total.
Abscess	8	....	1	....	1	3	13
Adenitis	4	1	1	....	....	2	8
Anchylosis of Shoulder	....	....	....	....	....	1	1
Balanitis	3	1	....	....	....	....	4
Burns	5	....	....	3	2	1	11
Calculus Vesical	1	....	....	....	....	....	1
Carcinoma "	....	....	....	....	1	....	1
Carbuncle	2	....	1	....	....	....	3
Caries of Inf. Maxilla	....	....	1	....	....	....	1
" " Cranium	....	1	....	....	....	....	1
" " Femur	....	....	....	....	....	1	1
" " Tibia	....	....	....	1	....	1	2
Chilblains	....	....	....	....	....	1	1
Concussion of Brain	5	....	1	....	....	....	6
Conjunctivitis (Granular)	....	2	....	....	....	....	2
Congenital Extrophy of Bladder, with Prolapsus Uteri	....	1	....	....	....	....	1
Contusions	7	1	....	3	....	....	11
Cystitis	1	..	....	....	....	....	1
Ecthyma	4	....	....	....	....	....	4
Eczema	4	....	....	....	....	....	4
Entropion	....	1	....	....	....	....	1
Epulis	1	....	....	....	....	....	1
Erysipelas	1	1	....	....	....	....	2
Fibrous Tumor of Scalp	....	....	....	....	1	....	1
Fistula in Ano	2	....	....	....	....	1	3
" Urinal	....	1	....	....	....	....	1
" " et Psoas Abscess	....	....	1	....	....	....	1
Fracture, Tibia	2	....	....	....	....	....	2
" Tibia et Fibula	6	....	....	....	1	2	9
" Femur	8	....	....	....	1	2	11
" Cervix Femoris	....	....	1	....	....	1	2
" Vertebra	1	....	....	....	1	....	2
" Humerus	1	....	1	....	....	....	2

DISEASE OR INJURY.	Cured.	Relieved.	Removed by Request.	Eloped or Disch'd Disorderly.	Died.	Remain.	Total.
Fracture Humerus et Radius	1	....	....	....	....	....	1
" et Ulna	1	....	....	....	....	....	1
" Radius	....	....	....	2	....	....	2
" Patella	1	....	....	1	....	....	2
" Clavicle	2	....	....	....	....	....	2
" " et Radius	1	....	....	....	....	....	1
" " " Ribs	1	....	....	....	....	....	1
" Fibula	5	....	....	....	....	....	5
" Ribs	2	....	....	....	1	....	3
" Cranium	....	....	1	....	....	....	1
" Basis Cranii	....	....	....	....	2	....	2
" Malleoli	1	....	....	....	....	....	1
" Os Calcis	1	....	....	....	....	....	1
" Pelvis	....	....	1	....	....	....	1
" Metatarsus	1	....	....	....	....	....	1
" Internal Condyle Humerus with Luxation of Forearm.	1	....	....	....	....	....	1
Compound Fract. Tibia et Fibula	4	....	....	....	1	....	5
" " Cranium	2	....	....	....	....	....	2
" " Malleolus	1	....	....	....	....	....	1
" " Phalanges	4	....	....	....	....	....	4
Comp'd Comminuted Fract. Cranium	....	....	....	....	1	....	1
" Com. Fract. Tibia et Fibula	....	....	....	....	....	3	3
" " Consp. Fracture Tibia et Fibula	....	....	....	....	1	....	1
Impacted Fracture Cervix Femoris	2	....	....	....	....	....	2
Gonorrhœa	25	1	9	2	....	4	41
Gun Shot Wounds	5	....	....	....	1	....	6
Hematuria	1	....	....	....	....	....	1
Hemorrhoids	1	1	1	....	....	....	3
Hernia	2	....	1	....	....	....	3
Herpes	1	....	....	....	....	....	1
Hydrocele	1	....	1	....	....	....	2
Injuria	10	2	2	2	....	2	18
Iritis	3	1	....	....	....	....	4
Luxation of Humerus	1	....	....	....	....	....	1
" Femur on Dorsum Ilii	....	....	....	....	....	1	1
" Carpus	....	1	....	....	....	....	1
" Radius forwards on Humerus	1	....	....	....	....	1	2
Morbus Coxarius	....	2	....	....	1	1	4
Necrosis of Tibia	....	1	....	....	....	....	1
" Femur	....	....	....	....	....	1	1
" Phalanges	1	....	....	....	....	....	1
Opthalmia	2	1	....	....	....	1	4
Orchitis	9	....	4	2	....	1	16
Ozena	1	....	....	....	....	1	2
Paralysis of Arm	1	....	1	....	....	....	2
Paronychia	7	....	1	1	....	3	12
Phymosis	4	....	....	....	....	....	4
Periostitis	1	1	....	1	....	1	4
Prostatitis	3	....	....	....	....	....	3
Ptosis	....	....	....	....	....	1	1

DISEASE OR INJURY.	Cured.	Relieved.	Removed by Request.	Eloped or Disch'd Disorderly.	Died.	Remain.	Total.
Ptyalism	....	....	....	....	....	1	1
Schirrus Mamma	....	....	....	....	1	....	1
Sprain	1	....	....	....	....	....	1
Spermatorrhœa	1	....	....	....	....	....	1
Stricture Urethra	4	2	....	....	....	1	7
Synovitis	1	....	....	....	1	1	3
Syphilis, primary	41	2	4	6	....	6	59
" secondary	32	1	2	4	....	4	43
Ulcers	19	2	1	....	....	4	26
Ulceration of Cornea	..	....	....	....	....	1	1
Varicocele	2	1	....	....	....	....	3
Wounds, Incised	6	....	....	....	1	....	7
" Lacerated	12	....	1	3	1	....	17
" Penetrating	...	....	....	....	....	1	1
" Punctured	2	....	....	....	1	....	3
" of Scalp	1	....	....	....	....	....	1
TOTAL	299	29	38	31	21	56	474

ALEX. TINSLEY, M. D.,
WM. GREEN, M. D.,
RESIDENT SURGEONS.

Aproved,
DANL. E. KISSAM, M. D.,
VISITING SURGEON for January, 1859.

AN ABSTRACT

OF THE DISEASES TREATED IN THE

MEDICAL DEPARTMENT

OF THE

BROOKLYN CITY HOSPITAL,

FOR THE YEAR 1858.

DISEASES.	Cured.	Relieved.	Removed by Request.	Eloped or Disch'd Disorderly.	Died.	Remain.	Total.
Amenorrhœa	1	....	....	....	....	....	1
Anæmia	2	....	....	....	....	....	2
Anasarca	1	....	....	....	....	....	1
Apoplexy	....	....	....	....	1	....	1
Ascites	....	....	....	....	1	....	1
Asthma, Spasmodic	1	1	1	....	1	2	6
Bright's Disease of Kidney	1	2	....	....	....	....	3
Bronchitis, Acute	7	....	....	....	....	1	8
" Chronic	....	2	....	....	....	....	2
Cancer Uteri	....	....	....	....	1	....	1
Cephalalgia	1	....	1	1	....	....	3
Cholera, Asiatic	....	....	....	....	1	....	1
" Infantile	....	....	....	....	1	....	1
Chorea	1	....	....	....	....	....	1
Cirrhosis	....	1	....	....	1	....	2
Congestion of Lungs	....	....	....	....	1	....	1
" Brain	....	....	....	....	1	....	1
Consumption	4	7	3	1	6	2	23
Convulsions, Hysterical	2	1	....	....	....	....	3
" Epileptic	1	....	....	....	....	....	1
" Uræmic	....	....	....	....	1	....	1
" Puerperal	....	....	....	....	1	....	1
Corneitis	1	....	....	....	....	....	1
Coup de Soleil	4	....	....	....	....	....	4
Delirium Tremens	5	....	....	....	1	....	6
Diarrhœa	4	....	....	1	....	....	5
Diabetis Mellitus	1	....	....	....	....	....	1
" Insipidus	....	....	....	....	....	1	1
Dysentery	10	1	1	2	....	1	15
Dyspepsia	4	....	1	....	....	....	5
Eczema	4	....	....	....	....	....	4
Emphysema of Lungs	1	1	....	....	....	2	4
Endocarditis	3	....	....	....	....	1	4

DISEASES.	Cured.	Relieved.	Removed by Request.	Eloped or Disch'd Disorderly.	Died.	Remain.	Total.
Enlargement of Heart	....	2	1	....	1	....	4
" Liver	2	2	....	....	1	....	5
" Ovary	....	....	....	....	1	....	1
" Spleen	....	....	....	....	1	....	1
" Tonsills	....	1	....	....	....	....	1
Erysipelas	2	....	....	....	....	....	2
Frambœsia	....	....	....	....	1	....	1
Fever, Congestive	1	....	....	....	1	....	2
" Intermittent	44	....	....	....	....	6	50
" Puerperal	1	....	....	....	....	....	1
" Scarlet	3	....	....	....	....	....	3
" Remittent	15	....	....	....	....	....	15
" Typhoid	12	....	1	....	3	2	18
" Typhus	2	....	....	....	....	....	2
Gastritis	2	....	....	....	....	....	2
Hemorrhage from Bowels	....	....	....	....	1	....	1
" Lungs	3	....	....	....	....	....	3
" Stomach	1	....	....	....	....	....	1
Heart, Valvular Disease of	....	3	....	....	....	1	4
" Nervous "	1	....	....	....	....	....	1
Hemicrania	1	....	....	....	....	....	1
Hemiplegia	1	3	....	....	....	....	3
Hepatitis	1	....	....	....	....	....	1
Hypochondriasis	2	....	....	....	....	....	2
Impetigo	....	....	....	1	....	....	1
Iritis	4	....	....	....	....	1	5
Jaundice	6	....	....	....	....	....	6
Laryngitis Acute	2	....	....	....	....	1	3
" Tubercular	....	1	1	....	2	....	4
Lichen	1	....	....	....	....	....	1
Malaria Chachexia	5	....	....	....	....	2	7
Measles	2	....	....	....	....	....	2
Menorrhagia	1	....	....	....	....	....	1
Neuralgia	2	....	....	2	....	....	4
Obstetrics	8	....	....	....	....	1	9
Otalgia	....	....	....	....	....	1	1
Paralysis	1	....	1	....	....	3	5
Pareplegia	1	....	....	....	....	1	2
Parotitis	1	....	....	....	....	1	2
Pericarditis	3	....	....	....	....	....	3
Periotitis	3	....	....	....	....	....	3
Pertussis	1	....	....	....	....	....	1
Pleurisy	9	....	....	....	1	....	10
Pleurodynia	2	1	....	....	....	....	3
Pneumonia	8	....	....	....	3	1	12
Pneumothorax	....	....	....	....	2	....	2
Porrigo Favosa	....	....	....	....	....	1	1
Psoriasis	1	....	....	....	....	....	1
Rheumatism, Acute	12	....	1	....	....	....	13
" Chronic	8	....	1	6	....	2	17
Scabbies	2	....	....	....	....	....	2
Sciatica	1	....	....	....	....	1	3
Secondary Syphilis	15	3	3	3	....	2	22

DISEASES.	Cured.	Relieved.	Removed by Request.	Eloped or Disch'd Disorderly.	Died.	Remain.	Total.
Softening of the Brain	....	....	....	....	....	1	1
Syncope Anginosa	....	....	....	....	....	1	1
Tabes Messenterica	....	....	....	....	1	....	1
Tonsilitis	3	....	....	....	....	1	4
Tinea Capitis	....	....	....	....	....	....	1
Ulceration of Stomach	....	1	....	....	....	....	1
" Cerv. Uteri	....	1	....	....	....	....	1
Uræmia	....	....	....	....	....	1	1
Variola	3	....	....	....	2	....	5
Varioloid	4	....	....	....	....	....	4
Vomitus	....	....	....	....	....	2	2
TOTAL	263	35	12	19	40	43	413
There were 8 births: 3 Males, 5 Females							8
TOTAL							421

JAMES J. ALLINGHAM,
RESIDENT PHYSICIAN.

JAMES CRANE, M. D.,
VISITING PHYSICIAN.

Statistics from Commencement to December 31st, 1858.

YEAR.	No. Treated.	Recovered.	Relieved.	Removed by request.	Eloped or Discharged.	Died.	Remaining Dec. 31, 1858.
1847.....	124	93	8	3	1	19	
1848.....	90	70	3	5	3	13	
1849.....	88	64	11	4	0	9	
1850.....	95	63	14	4	2	12	
1851.....	130	85	13	4	2	25	
1852.....	456	306	15	25	13	28	
1853.....	929	691	43	25	14	74	
1854.....	933	673	51	35	34	56	
1855.....	769	473	68	49	53	54	
1856.....	683	372	45	47	89	57	
1857.....	731	402	57	35	71	50	
1858.....	887	523	70	66	67	57	104
	5,915	3,815	398	302	349	454	104

ADDRESS.

Mr. President, Members of the Medical Profession, Trustees and Patrons of the Brooklyn City Hospital:

The occasion which has called us together to-day is one of no ordinary interest. The opening of a building designed to facilitate the advancement of the medical art, and especially of that solid foundation of all medical knowledge, *pathological anatomy*, marks an era in the history of medicine in this city; and I trust the impulse thus given to a science which has for its object the alleviation of the sufferings of our fellow-men will increase with accelerated momentum. I congratulate the medical profession of this city—nay, the friends of medical and surgical science everywhere—that the Trustees of the Brooklyn City Hospital, while recognizing the value of such humane institutions to their afflicted fellow-men, are not unmindful of the fact that they should also be made adjuvant to the science of medicine. The erection of this elegant and commodious Pathological Hall, with its rooms for holding *post mortem* examinations and dissections, with its convenient apartments for a medical library, for cabinets of pathological specimens, and this sumptuous theatre for demonstrations and lectures, is a practical illustration of the fact, that they thoroughly appreciate the twofold objects of an hospital. The philanthropic spirit which prompted the erection of yonder hospital building, capable of accommodating 350 patients, (although it has never contained more than half that num-

ber at one time,) and occupying a position which for conspicuity and salubrity is not excelled, if equaled, by any similar institution of our land—"the scenery of old Fort Green, of martial recollections and revolutionary celebrity, rising upward on its eastern boundary," and our growing city, with its beautiful streets and avenues spreading around it, challenges our warmest commendation. But I conscientiously believe that, for all future time, the erection of the Hall which we this day dedicate to science, will be regarded *par excellence* the most enlightened and praiseworthy benefaction of the Trustees to this Hospital. With the exception of the one at Bellevue, for which the profession are chiefly indebted to the indomitable energy of the younger Wood, no hospital, I believe, in the Union has a building entirely devoted to similar purposes; and I am sure that our neighbors across the river will consider it no reflection on their "Pathological Building," when I say there is *none* that will compare with this for convenience, elegance and solidity.

It is a distinguishing feature of the times in which we live, that the people are ready to co-operate with us in advancing the knowledge of anatomy, and that we are permitted, nay, often invited, to investigate the effects of disease on the remains of those we have been unable to save from death, thus conferring the last, best boon upon their surviving friends, in the ability it may impart to the physician to prevent similar evils in others. There was a time, not many years ago, when a hue and cry was raised against every one who violated, as it was conceived, the sanctuary of death; "when, at the peril of life and liberty, students of medicine stole a trembling glance at that glorious book which is opened to them in the construction of the human body." But those days, I trust, cannot return again. The community have become more enlightened; and we, as citizens of this commonwealth, are deeply indebted to the wisdom and intelligence which prompted our State Legislators to sanction by law the dissection of

the dead body. May we not hope that the cant about the *disturbance* of the dead has forever ceased. In the eloquent language of the lamented Godman, "It is mockery of common sense, and totally absurd; it impugns the verity of the religion we believe most holy; it is an indignity offered to the character of the Supreme! "What," he continues, "avails your profound interments, your six feet of earth, or iron coffins or leaden shrouds? The moment life departs, every breeze that blows wafts myriads of insects to the feast; they deposit their eggs, unseen by the friends who watch at the side of the corpse; committed with the body to the earth, they are dormant only till sufficient heat is evolved by putrefaction to call them into activity; then they feed to fatness on the rankling corpse; and, when ready to assume their perfect shape, work their way to the surface, and wing their flight to repeat a similar process upon the dead. Tell us, then, of the *repose* of the tomb, when the bodies we so carefully deposit in earth are not only dissolved by the chemical affinities of their own elements, but serve as food to myriads of insects, and are sooner or later carried abroad upon the four winds of heaven."

It is not mere curiosity that prompts us to endure all the privations and unpleasantness of making anatomical investigations. We associate with death that we may preserve life and give back health to the diseased. We breathe the noisome air of dissecting rooms, and the sickening emanations from dead bodies, and thus impair our health, and perchance endanger our lives, that we may gain that knowledge which is indispensable to enable us to meet the responsibilities of a medical practitioner. It has been truly said that a physician or surgeon, without a knowledge of anatomy, is a gross absurdity. The community at large well know this, and demand that knowledge of us. The Trustees of this Hospital require it of their Medical Officers; and reason, consistency and the welfare of suffering

humanity, demand that the public should give all the freedom to anatomical pursuits which propriety permits. The rulers of our State have but acted consistently in declaring that "It shall be lawful in cities, whose population exceeds thirty thousand inhabitants, to deliver to the professors and teachers in Medical Colleges and Schools in this State, and for said professors and teachers to receive the remains or body of any deceased person, for the purpose of medical and surgical study, provided that said remains shall not have been regularly interred, and shall not have been desired for interment, by any relative or friend of said deceased person, within 24 hours after death." Such is the law of the State regulating the dissection of the dead. It is an enactment demanded by the spirit of the age, and conceived in wisdom. And the day, I trust, will never come when our present or future rulers, some of whom I have the honor to address, will so far retrograde in the scale of intelligence as to obliterate or curtail its humane provisions. Let it remain to perpetuate the names of its enactors when the monumental marble which enshrouds their departed ashes shall have crumbled away amid the desolations of time. Our profession neither expect nor ask for any exclusive privileges. But they have a right to look to the community who are to be benefited by their labors, for the means of cultivating and perfecting their art. The outrages occasionally committed on the feelings of the community, by the carelessness or negligence of the anatomist, is both unjustifiable and unnecessary, and he who is guilty of it should be publicly rebuked by his professional brethren.

But enough has been said on this subject for our purpose, and I proceed to consider briefly the value to practical medicine of that branch of anatomical science which treats of the changes of structure effected in the body by disease. Pathological Anatomy is a science of modern origin. Its value, it is true, was appreciated in some

degree at an early period in the history of medicine, for Pliny informs us that dead bodies were examined in Egypt at the time of the Pharoahs, with a view to detect the seats of disease; but the results of these observations are unknown to us. It does not comport with the brevity which the occasion demands, to trace its gradual progress down through the middle ages to the present time. Suffice it to say, that with the *début* of Bichat upon the theatre of active life, towards the close of the last century, commenced a new epoch in the history of pathological anatomy. The extraordinary impulse given to this science by the labors and writings of that illustrious man, have justly entitled him to the honor of being called the father of modern pathological anatomy. For to his influence and example are we chiefly indebted for the discoveries and improvements which have been achieved by the anatomico-pathological investigations of his successors in different quarters of the civilized world, since the time in which he wrote, and for the elevated rank it this day occupies among the sciences that demand our attention.

The glory of German and French medical science is its *pathology*. But while we accord to our transatlantic brethren pre-eminence in this department of medicine, we refer with pleasure to the fact, that its importance was early recognized in our own country; and the zeal with which it has been cultivated by American physicians, and the valuable discoveries to which it has led them, is worthy of commendation. A brief outline of its history, and of some of its achievements for scientific medicine in this country, may not be uninteresting. I allude, with some feelings of pride, to the circumstance that the first systematic work on pathological anatomy published in this country is the production of a New Yorker, our distinguished neighbor, Dr. John W. Francis. It is a quarto, entitled "*Cases of Morbid Anatomy*," and was published, I believe, in 1820. An able reviewer, in the

third volume of the American Medical Recorder, declares that the cases "are detailed with an accuracy and judgment which must rank this work among the ablest productions in the department to which it relates." "The diagnostic indications," he continues, "of a scirrhous and strictured state of the pylorus, have perhaps never before been so well defined; and by no author has the peculiar appearance of the liver induced by intemperance, as distinct from the effects of ordinary inflammation, been so minutely or so well delineated as we find it here." "The work," he adds, "is a valuable acquisition to the profession." Next in chronological order, we have the "*Treatise on Pathological Anatomy*," of the late Dr. Horner of Philadelphia, published in 1829. It is to a very satisfactory degree a work of original observation; and the chapters and plates elucidative of the pathology of the gastro-intestinal mucous membrane are of lasting value. The latest and most complete American work on pathological anatomy, (three editions of which have been published,) is that of Dr. Gross of Philadelphia, and notwithstanding its defects, (and what treatise is free from them,) it is one of the most complete expositions of Pathological Anatomy in our language. American editions of the works of Audral, Bichat, Baillie, Morgagni, Carswell, Hope, Craigie, Rokitansky, Jones and Sieveking and others, have also been issued; and the periodical literature of our country abounds in monographs on special subjects of pathological anatomy, all of which illustrate that American physicians properly estimate the value of morbid anatomy to medical diagnosis and practice.

If time permitted, it would give me sincere pleasure to refer to the various original memoirs on this department of medicine which are scattered through our American medical journals. And I trust I shall be pardoned for occupying your attention, in alluding to some of the labors of *one* who, perhaps, has done more by his anatomico-pathological investigations, to extend the bound-

aries of our science, than any other individual on this side the Atlantic. I refer to Dr. Gerhard of Philadelphia, the first historian of tubercular meningitis; the author of the most valuable observations on the pathological anatomy of lobular pneumonia that have yet been published; the careful observer, to whom the profession are indebted for the means of an accurate diagnosis of typhus and typhoid fever. The memoir of Dr. Gerhard on the "Cerebral Affections of Children," published in the February number of the American Journal of the Medical Sciences for 1834, contains an account of the investigations made by himself and M. Rufz at the Children's Hospital of Paris, into the pathology of hydrocephalus, by which the law was first clearly established that this disease depended on tubercles of the pia mater. In their account of tubercular meningitis, M. M. Rilliet and Barthez state that M. Papavoine published *two cases only* of the disease, and that Dr. Gerhard's essay was the next account of it that was published. This latter, with the inaugural dissertation of M. Rufz (1835), and the thesis of M. Piet (1836), they regard as having converted into general laws the conclusions drawn by M. Papavoine from his cases, and as having proved (1), that meningeal granulations are in their nature tuberculous; (2), that they are analogous to the granulations of the serous membranes; (3), that they only exist in subjects who have tubercles in other organs. "These essays," they remark, "are worthy of praise, on account of the good sense which pervades them, and for the rigorously exact method by which their authors are uniformly guided." The discovery of this important pathological law, although it has led to no valuable theraupeutic results, enables us to explain the exceeding fatality of hydrocephalus, has removed the vagueness and uncertainty which previously surrounded its pathology, and is an achievement which reflects the highest honor upon American medicine. Of the essays of Dr. Gerhard, illus-

trating the pathology of lobular pneumonia, (published in the American Journal of Medical Sciences, 1834,) it is sufficient to quote the opinions of M. M. Rilliet and Barthez. In their literary history of the affection the following passage occurs: "Dr. Gerhard's essay is the result of careful observation, is founded entirely on an analysis of facts, and is, beyond all dispute, the most remarkable treatise that has been published on the subject." To the distinguished Philadelphia pathologist are we likewise indebted for the first positive proof of an essential distinction between typhus and typhoid fevers, which Louis himself had previously considered identical. By the careful observation of the symptoms of the two diseases during life, and the accurate *post mortem* examinations which he made in connection with Dr. Pennock of the same city, during an epidemic of typhus which prevailed in the Blockley Hospital in 1836, and for several years subsequently, he was enabled to establish the fact, that although there were certain striking points of resemblance, the differences were sufficiently fundamental to indicate that they were distinct diseases. Numerous and careful observations subsequently made in this country and Europe fully confirm the result of his observations.

The labors of Dr. Gerhard have been referred to, not merely because of the glory they have shed upon American medicine, nor on account of the illustrations they afford of the value of pathological anatomy to practical medicine, but I have alluded to them also because they have not met with that magnanimous recognition from some of our leading American authors which justice demands; and we have not yet done so much for the advancement of science that we can afford to be shorn of any of the laurels we have really won. Moreover, by insisting upon the full recognition of the claims of a discoverer, we espouse and defend the cause of all scientific men; for if their labors are not stimulated by the hope

of honor, ambition will languish, and science itself will cease to progress. And in this connection, I am reminded of a recent instance, (I hope you will pardon the digression, and my friend the allusion,) in which the medical press of this country failed to recognize or acknowledge the scientific value of the production of an American, now one of the surgical staff of this hospital. When Dr. Isaacs had completed his investigations into the anatomy and physiology of the kidney, his paper, embodying the results obtained, was sent to the editor of the leading medical journal of this country for publication. The article was declined, because they said they could not incur the expense necessary for the copious illustrations of a paper which contained no facts that had not been announced by previous observers. The subsequent history of that paper is known to most of this audience. It was read before the New York Academy of Medicine, who appreciated its merit, and published it in their Transactions; and I believe it has been said with truth, that no paper has ever emanated from that learned body which has given it so wide-spread a scientific reputation. It was subsequently translated into the medical journals of Germany; it has been republished entire, with all the illustrations, in the April and July numbers (1858) of the Journal of Physiology, edited by Brown-Séquard of Paris, and was pronounced by the ablest living microscopical anatomist, Ch. Robin of Paris, "the most valuable contribution to structural anatomy that has been made for many years."

Time will not permit me to enlarge upon the light which morbid anatomy rationally pursued, has shed upon practical medicine. The rapid advance which our science has made during the present century, is chiefly owing to the industry with which morbid anatomy has been cultivated. Departments already known, have been more thoroughly explored; opinions formerly held have been modified or corrected, and the boundaries of science

have been extended. Prior to the incoming of the present century, medicine was distinguished by theories and conjectures; but these have given place to the study of facts, and although we may yet be in the twilight, who can doubt that on the basis of pathological anatomy, the foundations of a perfect science are laying, and the elements of its future philosophy are evolving and assuming form. Examples of its utility might be brought forward without number, but none perhaps is more striking than the increased precision it has given to our knowledge of inflammatory diseases. Formerly it was deemed sufficient to ascertain the organ which was the seat of an inflammatory affection, but since morbid anatomy has taught us that a serious lesion may occur in one of the tissues composing an organ, without affecting others immediately contigious, it is considered an object of primary importance to ascertain the particular tissue affected. Whether, in the lungs for instance, it be the serous, the mucous or the parenchematous; and this can be frequently done by careful scrutiny, for, the symptoms characteristic of each, have been clearly pointed out by recent observers. The distinction of the different species of inflammation attacking the eye, and the accurate apprehension of the danger of each, by all recent observers, furnish a beautiful example of the increased precision which the attention to the variety of texture has given to pathology.

The grand improvement in medical practice which the study of morbid anatomy has effected, is remarkably exemplified in the case of pulmonary and cardiac affection. Prior to the incoming of the present century, they were involved in almost cimmerian darkness; but since the application of auscultation and percussion, means which are only useful by enabling us to ascertain the physical alterations induced by the disease, or, in other words, the morbid anatomy of the affected organ, they are recognized with a facility and precision only equaled by the success with which they are treated. Without

this method of examination how could we detect or distinguish endocarditis or pericarditis? how distinguish a severe bronchitis from pneumonia, or the early stages of phthisis, or trace their progress and follow their increase or diminution? How establish the diagnosis of the two kinds of emphysema, the one with, and the other without pneumothorax, from fistulous communication with the bronchiæ? Emphysema of the lungs, a very important and frequent disease, was unknown before the time of Laennec, who first accurately described it in the dead body.

All are familiar with the numerous improvements in the treatment of the diseases of the ear, which followed Itard's investigations concerning the morbid anatomy of that organ; with the benefits which have resulted from an accurate acquaintance with the morbid anatomy of the kidney, the brain and the gastro-intestinal canal, (it is unnecessary to multiply examples,) these and many other discoveries, all replete with practical advantages, are the results of the attention given in our day to the study of morbid anatomy.

Pathological anatomy is not less important to the surgeon than to the physician. Of this, examples suggest themselves on every side, but I propose only to allude to its importance in operative surgery. *Healthy anatomy* merely instructs the surgeon how to operate. The operation of tracheotomy, for example, is a simple dissection. A child has croup, the resources of the materia medica have been exhausted without avail, and the surgeon is called as a *dernier resort* to open the trachea. The operation consists in dividing the integuments and fascia, separating muscles, turning aside vessels, incising the rings of the trachea, and inserting a silver tube. Lithotomy is also a simple dissection. The parts to be cut are sound; the surgeon has but to dissect on the living body as on the dead; to open the bladder with his knife, and extract the stone. Such operations are dissections of healthy

parts, and the surgeon just fresh from the dissecting-room is competent to perform them. *Morbid anatomy* teaches the surgeon how to operate in cases of a more perplexing nature, to dissect and disentangle parts that are altered in form or texture, and massed together by disease, to reason and decide in the most critical circumstances. Thus in a case of strangulated hernia, the surgeon has to estimate the degree of strangulation, to conjecture the condition of the parts, and to consider all the possible circumstances in which they may be found at the time of the operation. It is not simply a nuckle of sound intestine, nor the natural opening of the abdominal ring, that the surgeon has to look for, but he has to dissect parts thickened, adhering, massed together, the sack quite unlike the peritoneum, whence it is derived; the intestine almost gangrened; the omentum a putrid mass; the whole in a state of confusion, which only a man skilled in anatomy, and perfectly familiar with the various appearances of disease can disentangle. It requires a reflecting and sagacious head, well stored with precedents, and thoroughly acquainted with the diseased as well as the natural condition of parts, to decide whether they can be saved by any operation, or to distinguish in the half putrid mass, the intestine from the omentum, the fascia from the sac, and to dissect these delicately and skillfully.

It may be deemed unnecessary in the middle of the nineteenth century, thus to have occupied your time in urging the importance of pathological anatomy to the physician and surgeon; but I find a sufficient apology in the consideration that like the truths of holy writ, the great facts of science, which have the same divine origin, cannot be too often impressed. Moreover, it is an astounding fact that even in this vicinity, where the influence of the New York Pathological Society has been so potent in demonstrating the value of morbid anatomy, and in inciting to its zealous and enthusiastic cultivation, there are those who do not yet acknowledge its vast im-

portance. It has been urged that the cultivation of morbid anatomy leads to exclusive solidism in medical doctrines. In reply to this objection, I need but mention the fact that in this, the golden age of morbid anatomy, the opinions of the medical world have changed from the extremes of humoralism and solidism, and approached the "*juste milieu*," and it is now mutually acknowledged that the solids and fluids form one great whole; every modification of one being followed by a modification of the other. The absurdity of this objection is also manifest from the fact that such men as Andral, Carswell and Cruvelhier, distinguished as pathological anatomists, are not less distinguished for their investigations, which show that the proximate cause of disease often consists in an alteration of the blood. It has likewise been urged that morbid anatomy is only instructive after the death of the patient. This is a dangerous doctrine, and is based on a misconception of its end and aim. It is not in the dead-house only that we investigate the morbid alterations which disease produces in the tissues of the body, for how often can we detect the physical changes which internal organs have undergone in the living patient? The chemical and microscopical examinations of the renal secretion will frequently reveal the pathological anatomy of the genito-urinary organs with a clearness and accuracy amounting to demonstration; and the application of auscultation and percussion enables us to ascertain the morbid anatomy of the thoracic organs with the greatest precision. Moreover, it is not claimed, as the objection would seem to imply, that the changes in the dead body which disease leaves behind it is the only source from whence we can draw our knowledge of the changes in the living body constituting disease. No enlightened physician believes that typhoid fever is merely an inflammation of Peyer's glands, that the peculiar change of the liver from its natural color to that of a bronze or slate color, constitutes remittent fever; that cholera infant-

um is nothing more than an inflammation of the intestinal mucous folicles, or that the whole of disentery is an inflammation of the large intestines. The alteration in structure which disease produces is only one of the elements of our reasoning on the nature of diseased actions themselves; but if in addition to the causes of the disease, the nature of its leading symptoms, their consequences, local and general, and the effects of theraupeutical agents, in the living body, we contemplate the morbid changes observed after death, we shall be much more likely to treat our patients successfully than if we merely studied disease at the bedside.

But while pathological anatomy as one of the elements of medical science has accomplished much for her advancement, it must be confessed that much yet remains to be done; and thanks to the spirit of the age in which we live, it was never cultivated more diligently or successfully than at the present time. Every day it brings some valuable addition to our stock of knowledge. In the emporiums of science and learning, in the *Old* World and in the *New*, investigations are going on with a zeal and industry and freedom from popular prejudice unknown to the history of the past. And some philanthropists in their desire to overcome the popular feeling against such investigations have not only directed *post mortem* examinations of their bodies to be made, but have also requested that they should be dissected and demonstrated in the public theatre for the benefit of students. "Such was the testamentary request of the celebrated Bentham,—a request which was faithfully executed by his friend Dr. Southwood Smith, of London, in the anatomical theatre of the school to which Dr. Smith was attached, and of which he was a valued ornament."—*Dunglison's Medical Student.* Such also was the testamentary request of our own lamented Warren—the valued professional teacher, the skillful surgeon and the enlightened student of nature, whose name is as imperishable as the foot-prints on the sand-stone tablets he so

much delighted to contemplate. As much as Dr. Warren accomplished while living for the good of his fellow man by the exercise of his humane and god-like calling, his dying request that his body should be dissected and his skeleton placed in the anatomical museum of the college, where he was so long a distinguished teacher, will exceed all the benefactions he had before bestowed upon humanity, by the influence which it will exert in removing the prejudices of those who are opposed to such investigations.

It is a gratifying fact that the teachers of practical medicine and surgery in the medical schools of our country, are beginning to realise the importance of conveying a practical knowledge of pathological anatomy to the student. In your student days, Mr. President, and even in mine, we listened with rapturous delight to the beautiful *descriptions* of the anatomical character of diseases by the eloquent and lamented Chapman. It is unnecessary to remark that no available knowledge of pathological anatomy could be thus obtained. Now, however, the lectures on "practice" in many of our schools are illustrated, not merely by highly colored plates, or preparations so changed by the action of preservative fluids as to be hardly recognized, but also by *specimens* whenever practicable, *fresh from the subject*, together with an account of the phenomena observed during life, and the effects of therapeutic agents. This is indicative of progress in the right direction, but it falls far short of furnishing the student with that reliable, and I may add indispensable knowledge of morbid anatomy which will be of value in the practice of the healing art; and I trust the day is not remote when the efforts to teach practical medicine and surgery in the lecture rooms of our medical colleges will be numbered among "the things that were," for, it is a gross absurdity to suppose that they can be learned, as it were, by hearsay. The chief objection to this mode of teaching is that the student has no oppor-

tunity of exercising his own judgment in distinguishing diseases, of observing for himself the effects of remedies in their cure or in the fatal cases, of tracing the results of morbid action in the cadaver; and consequently, at the end of his studies, although he may be well grounded in Anatomy, Physiology, Materia Medica and Chemistry, (the mere alphabet of the true science,) he may be a perfect medical logician, able to descant upon the beauties of his profession, and talk learnedly about its principles, but when subjected to the only true test of professional merit, the diagnosis and treatment of disease at the bedside, all his learning avails him nothing. The well regulated hospital furnishes the only place when the laws of *pathology* and *therapeutics* can be properly studied, or the modes of detecting, appreciating and applying them, adequately taught, and it is to these humane receptacles of the sick that we are to look chiefly for the future improvements in our art, for it is here alone that we can observe the symptoms of disease and the effects of remedies upon a large scale, and study advantageously in the dead-house their connections with the morbid alterations of internal organs.

I have spoken of the facilities offered by this building for the study of healthy and morbid anatomy in their connections with surgery and practical medicine, and have alluded to its convenient apartments for a medical library. It would, of course, be a work of supererogation to descant before the present audience upon the necessity or benefit which would result from a well selected library for reference, embracing a collection of the leading medical periodicals of this and other countries, or to refer to the fact that no physician of this city can write a paper on any professional subject, requiring even a moderate degree of research, without resorting to New York for authorities. The fact that such ample provision has been made for its accommodation, is a stronger argument for its necessity than words can express. Time

does not permit me to present an elaborated plan for the attainment of a medical library for Brooklyn. But I may be permitted to express the hope that some scheme will soon be devised for the establishment of a library here, which will do honor to its founders, and will result in incalculable benefit to the medical profession of this city.*

I have also referred to the adaptation of this theatre to lectures and demonstrations. Desirous of making this institution useful to the profession at large, and through them to the community, whose comfort so materially depends upon the skill and good judgment of the family physician, the professional staff have resolved that courses of lectures shall be delivered annually by its members upon practical subjects in medicine and surgery. The establishment of a medical school, in its ordinary acceptation, is not our purpose ; but it has been proved, by the large attendance of the leading practitioners of the city upon a series of professional lectures, delivered during the past year in the operating room of the hospital, that lectures on such practical subjects as daily demand the attention of the practitioner will not prove unacceptable.

It only remains for me, in the name of the medical officers, to tender to the Trustees of the hospital, who have in a spirit of disinterested benevolence erected this edifice and consecrated it to science, the grateful homage of our hearts. When you shall have passed from the theatre of life, that blessed public charity, the "Brooklyn City Hospital," and the noble structure we now occupy will remain as monuments of your intelligence and munificent liberality.

And when the magnificent Brooklyn Academy of Music, and the largest edifice † in existence dedicated to the ser-

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* Through the liberality of the Board of Trustees, a medical library has recently been founded, embracing complete sets of the leading medical periodicals of this and other countries.

† Plymouth (Rev. H. W. Beecher's) Church.

vice of the ever-living God, shall have merged from their embryonic state, and attained their full development; when the limpid waters from Baisley's Pond shall ripple through our streets and sparkle in our dwellings;* when the institutions of learning and benevolence which now grace our city shall have increased until they are "thick as the leaves in Vallombrosa," this hospital, (which owes so much of its usefulness, and the elevated rank it is attaining, to your ceaseless and indefatigable devotion to its interests,) with it commodious Pathological Hall, will yet stand prominent among the charitable and scientific institutions of our city—the pride of your fellow-citizens, and the admiration of the benevolent throughout the land. Long may you live to bless it with your counsels, and to shed upon it the mellow radiance of your declining years.

While we are grateful for the increased facilities this edifice affords for enlarging the boundaries of professional knowledge, the Medical Board do not forget that new responsibilities are thus imposed upon them. They feel that more is expected of them, and I trust are ready to enter on their labors with increased zeal and energy. How much greater are the opportunities which we possess to-day in this institution, for the acquisition and dissemination of knowledge, than did our honored predecessors, McClelland, Hyde, Mason, Mitchell, Cook, Cullen, Corson, Hunt and Thorne, names that are as household words in this community, and who, I trust, will long be spared to dispense the blessings of life and health to their fellow-men. Let it not be our reproach, that the liberality of the Trustees has been misplaced; that we are indifferent to the advantages we enjoy, or that we are unwilling to toil for the advancement of an art which is so intimately connected with man's dearest interests.

* The celebration of the introduction of water into the city took place on 28th April 1859.

Regulations for the Admission of Patients.

Persons accidently wounded, or otherwise injured, are received at all hours, day or night. (Entrance for accidents at the south end of the building.)

No person having any contagious or infectious disease shall be admitted into the Hospital.

All pay patients shall be admitted by the visiting or attending medical officer, under such rules as the Committee may establish.

The rate of Board for Patients, (except accidents, which are free from charge,) residents of Brooklyn, is three dollars per week. Patients occupying private wards, will be charged from five to eight dollars per week. Four weeks board must be paid in advance, and when the patient is discharged in less time, all excess over the amount required by the actual time will be returned.

Patients with "Mania a potu," occupying private wards, shall pay twenty-five dollars, in advance.

LYING-IN DEPARTMENT.

Lying-in women will be received upon the same terms as other patients. Any female brought in, (being suddenly overtaken with labor,) will be properly cared for, until she can be removed with safety.

March 20, 1858.

Note.—There are three private rooms with two beds in each, which may be occupied by patients willing to incur the extra expense at the rate of five dollars per week, if subject to the two occupants, or ten dollars if occupied singly.